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CONFIRMATION NO. 7112

<b>SERIAL NUMBER</b> 10798,809	<b>FILING OR 371(c) DATE</b> 03/10/2004 <b>RULE</b>	<b>CLASS</b> 351	<b>GROUP ART UNIT</b> 2873	<b>ATTORNEY DOCKET NO.</b> 1232-5334	
<b>APPLICANTS</b> Satoru Okinishi, Tochigi, JAPAN; <b>** CONTINUING DATA *****</b> <i>none</i> <i>TI</i> <b>** FOREIGN APPLICATIONS *****</b> JAPAN 2003-065084 03/11/2003 <i>TI</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/28/2004</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>TI</i> Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 5	<b>INDEPENDENT CLAIMS</b> 24
<b>ADDRESS</b> 27123					
<b>TITLE</b> Ophthalmologic apparatus					
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		